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Application or Docket Number 10/516074

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		CLAIMS A	•	(Column 1)		(Column 2)		SMALL ENTITY TYPE		OF	OTHER THA		
TOTAL CLAIMS					•		RAT	Έ	· FEE	7	RATE	·F	EE
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If the difference in column 1 is less than zero, enter "0" in column 2					TOTA	۹L		OR	TOTAL	7	50		
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AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞHE NUMB PREVIOL PAID F		PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	TIO	DI- NAL EE
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	"If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										7		